Medicare Training Conference Call Program Evaluation

Program Title: Program Date:

Please put an X in the appropriate box

	Excellent	Very Good	Good	Fair	Poor
Program	5	4	3	2	1
How well did the					
conference call meet					
your expectations?					
Rate the length of the					
conference call					
Rate the conference					
call schedule including					
start time, and end					
time					
Rate the relevance of					
the conference call					
subject matter to your					
current or future work					
Rate your knowledge					
of the subject matter					
before the conference					
call					
Rate your knowledge					
of the subject matter					
after the conference					
call Instructor					
Rate the speaker's subject matter					
knowledge and ability					
to answer questions					
Rate the speaker's					
ability to present the					
information in an					
understandable way					
Rate the speaker's					
effectiveness as a					
communicator					
Rate the preparedness					
of the speaker					
Materials					
How well did the					
conference call					
materials relate to					
your skill level?					

	Excellent	Very Good	Good	Fair	Poor
Materials con't.	5	4	3	2	1
How useful were the handouts in communicating the					
subject matter?					
How easy was it to access the materials prior to the conference call?					
How effective are the handouts as a resource?					

Please tell us what you liked about the training conference call?

Please tell us what you disliked about the training conference call?

Please tell us what we can do to improve future training conference calls?

What methods of delivery do you prefer to receive training? (Check all that apply)

what methods of delivery do you prefer to receive training? (Check a
Computer/Web-based Training
In-person Training
Satellite Broadcast
Print
E-mail
Internet resources
CD Rom
DVD
Audio CD
VHS tape
Web streaming
Please tell us about you. Are you:
Call Center Manager
Call Center Representative
Carrier
CMS Central Office Staff
CMS Regional Office Staff

__Durable Medical Equipment Regional Carrier (DMERC)

__Fiscal Intermediary (FI)

__Provider Outreach Staff __System Maintainers

__Program Safeguard Contractors

Comments: Please provide us with any comments you may have regarding any aspects of the conference call. Please e-mail your completed form to: contractortraining@cms.hhs.gov